

crispprd 1.0



Abstract

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Project Title: MAINTENANCE AND ENHANCEMENT OF COGNITIVE ADLS

Abstract: *Normal aging is associated with loss of cognitive function. In laboratory studies, cognitive function in the elderly can be improved by training to enhance memory and fluid intelligence. However, it is not clear if these interventions lead to improved ability to perform activities of daily living (ADLs) which require fluid intelligence and memory (cognitive ADLs). This is especially important because the loss of cognitive ADLs is closely related to increased hospitalization and other increased health care utilization. The long-term objective of this proposal is to find methods to maintain or enhanced the ability of older adults to perform cognitive ADLs. The specific objectives are to: 1) identify and enroll elderly adults at risk for decline in cognitive function; 2) design and implement a cognitive intervention to improve memory and fluid intelligence; 3) evaluate the effectiveness of the intervention on maintaining or improving cognitive ADLs; 4) use baseline characteristics to identify individuals most responsive to the intervention; and 5) conduct a site-specific study of the effect of the intervention on health services use and costs. Older adults without impairment in cognitive ADLs, yet at risk for loss in these functions, will be identified through a rigorous and efficient screening methodology. After informed consent, they will be randomized to control and intervention groups. The intervention group will receive training in memory and fluid intelligence weekly over 6 weeks and booster sessions every 6 months for 18 months. In addition, exercises to be done at home will be provided weekly for six weeks and then monthly to 18 months. Control subjects will receive equal contacts with training in assertiveness techniques. Both groups will be followed for two years with assessments of cognitive function and cognitive ADLs at 2, 6, 12, 18, and 24 months. The difference between control and intervention groups will be analyzed after adjusting for baseline characteristics. Health resource utilization and*

costs will be tracked through the Regenstrief Medical Record System and interview.

Thesaurus Terms:

*cognition, functional ability, human old age (65+)
disease /disorder proneness /risk, exercise, health care cost /financing, hospital utilization,
human therapy evaluation, intelligence, longitudinal human study, memory, training
automated medical record system, behavioral /social science research tag, clinical
research, human subject, interview, questionnaire*

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